

## SSTS MAINTENANCE REPORT

System Location			
Address 12090 196th st		Telephone Number	(832) 687-0340
City Marine on St. Croix	State mn ZIP 55047	Property ID No./GEO Code	
Owner dave repp	Pumping Date May 30, 2018		
Contractor			
Maintainer Row Sewer Service	MPCA License No. L3309	Telephone Number	(651) 465-5505

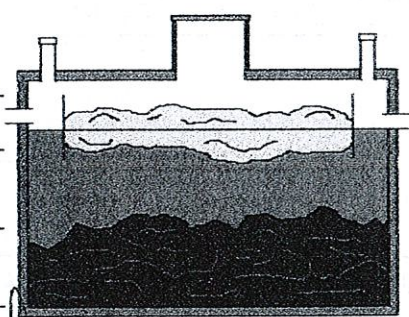
What was done to the system?
<input type="checkbox"/> Tank(s) Pumped <input type="checkbox"/> Sludge and scum measured. Do tanks need to be pumped? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no provide measurements below)

Report Liquid Capacity in Gallons
Tank 1: 1,000 <input checked="" type="checkbox"/> Pumped    Tank 2: 1,000 <input type="checkbox"/> Pumped Tank 3: _____ <input type="checkbox"/> Pumped    Tank 4: _____ <input type="checkbox"/> Pumped Total Gallons Pumped: 1,200

Visual Inspection (note any problems with the system):

NOTE: This does not serve as a compliance inspection.

*Tank Measurements-Use Only if Tank(s) Were NOT Pumped			
Tank Length _____ in.	<input checked="" type="checkbox"/> Tank Width _____ in.	<input checked="" type="checkbox"/> Tank Depth _____ in.	= Tank Volume (cubic inches) _____
Tank Radius _____ in.	<input checked="" type="checkbox"/> Tank Radius _____ in.	<input checked="" type="checkbox"/> 3.14	= Tank Volume (cubic inches) _____
Tank Volume (cu. in.) _____	/ 231.01 = Liquid Capacity _____	Gallons / Tank Depth _____ in.	= Gallons/Inch _____
Sludge Level _____ in.	<input checked="" type="checkbox"/> Gallons Per Inch _____	= Sludge Volume _____	Gallons
Scum Level _____ in.	<input checked="" type="checkbox"/> Gallons Per Inch _____	= Scum Volume _____	Gallons
Sludge Volume _____	+ Scum Volume _____	= Total Sludge and Scum Volume _____	Gallons
Total Sludge and Scum Volume _____	/ Liquid Capacity _____	= Percent Sludge and Scum in Tank _____	%



Tank Depth measured from invert of outlet pipe to bottom of tank

\*Tanks must be pumped if either of the following conditions exist:

1. The top of the sludge layer is less than 12 inches from the bottom of the outlet baffle; or
2. Total sludge and scum volume is greater than 25 percent of the tank's liquid capacity.

Signature _____	Date _____	May 30, 2018	Reset Form
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